(e) Memorandum of Understanding between of India and the Government of Russian Federation on Co-operation and Collaboration in the field of Indian Traditional System of Medicine and Homoeopathy was signed in June, 1999. Also, we have a "Plan of Co-operation in the field of health & medicine" between the Ministry Health of the Republic of Hungary and the Ministry of Health & Family Welfare of the Republic of India for 2001-2005, signed in December, 2001.

Trauma centres in Government Hospitals

341. SHRI B.J. PANDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of trauma centres available in different Central Government Hospitals in the country, as on today;

(b) whether any such facility is available at State or private hospitals and a list of such centres; and

(c) what amount has been sanctioned to AIIMS for opening such a centre and when it is expected to be opened?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) As on tpday, no separate trauma centres are available in Central Government Hospitals. However, all these hospitals are well equipped to provide the accident and emergency services including the trauma cases.

(b) 'Health' being a State subject, the Ministry of Health & Family Welfare does not maintain such information.

(c) The total project cost of the proposed Trauma Centre at AIIMS is Rs. 54.14 crores and it is expected to be completed / commissioned in 24-26 months after the start of construction, which was done in January, 2002.

Birth and death rate in Orissa

342. SHRI MAN MOHAN SAMAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that both the birth rate and death rate are high in Orissa in comparison to the national average;

(b) if so, the reasons therefor;

(c) whether Government have taken any special measures to bring the State figure down to the national average; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) It is evident from the data given below that the birth rate of Orissa is lower and death rate is slightly higher than the national average. The CBR and the CDR in Orissa are declining with time.

	C.B.R.		CDR.	
	1998	1999	1998	1999
Orissa	25.7	24.1	11.1	10.7
All India	26.5	26.1	9.0	8.7

(c) and (d) Government of India has constituted an Empowerment Action Group for weak States including Orissa to formulate programmes aiming at achieving socio-demographic goals as enumerated in National Population Policy—2000. Under EAG, Reproductive Child Health Porgramme (RCH) in Orissa is getting strengthened through undertaking new initiatives like, extending RCH Camp and RCH out-reach services to the districts not covered so far, improving the infrastructure of sub-centre, Primary Health Centre etc., undertaking training of Dais and so on and has also agreed to the State Action Plan submitted by the Government of Orissa to be implemented utilizing the funds from the domestic Budget provided under EAG Schemes.

Infant mortality rate in Orissa

343. SHRI MAN MOHAN SAMAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the infant mortality rate in Orissa is one of the highest in the world;

(b) whether Government have studied the reasons for this sorry state of affair;

(c) whether it is also a fact that few pockets of Orissa are high in infant mortality rate than some parts;